INFORMATION BULLETIN



WORKFORCE INVESTMENT ACT

Number: WIAB00-36

Date: October 27, 2000 Expiration Date: 6/30/01

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TO: LOCAL WORKFORCE INVESTMENT AREAS

CHIEF ELECTED OFFICIALS

CALIFORNIA WORKFORCE INVESTMENT BOARD STAFF

WDB STAFF

SUBJECT: CUSTOMER SATISFACTION SURVEYS FOR WIA

This information bulletin transmits two draft customer service satisfaction survey instruments for employers and participants. Under the Workforce Investment Act (WIA), customer service satisfaction surveys must be completed each program year. This will be the first time such a survey has been attempted. Interested parties are invited to provide comments/suggestions regarding the survey instruments.

The State's role in customer satisfaction will be implemented in two steps: (1) compliance with the law and (2) convening a workgroup with the Local Workforce Investment Areas (LWIA) and One-Stops for continuous improvement. The attached survey instruments are the first steps for compliance with the law. There will be further information regarding future partner workgroups provided at a later date.

Section 136 of the WIA specifies core indicators of performance and their application to workforce investment activities in adult, dislocated worker, and youth programs (funding streams), which include two measures of customer satisfaction. These two customer satisfaction measures apply across the three funding streams. A minimum of 500 participant and employer customer satisfaction responses will be collected by telephone interviews during the program year. Please refer to Section 136 of the WIA; Title 20 Code of Federal Regulations Part 666; Training and Employment Guidance Letter (TEGL) No. 7-99, dated March 3, 2000, entitled Core and Customer Satisfaction Performance Measures for the Workforce Investment System; and TEGL No. 6-00, dated September 21, 2000, entitled Guidance on Obtaining Customer Satisfaction Results for Participants and Employers Receiving Services Under Title I of the WIA for further background information.

The Employment Development Department Audit and Evaluation Division has developed the attached draft survey instruments. The *TEGL 6-00* notes that, "states must use the minimum core customer satisfaction questions specified . . . to collect and report satisfaction outcomes." These questions are contained in the draft surveys in addition to other questions that are being collected for the purpose of improving services. Your input is critical to the successful completion of these documents.

Also important is your input on the definition of substantial service. The *TEGL* 7-99, Section 6, states "All employers who have received a *substantial service* (italics added) involving personal contact with One-Stop staff are eligible to be chosen for inclusion in the random sample (this excludes those employers who request a brochure or a standard mailing, those who ask a question that is answered with little expenditure of staff time, or those who use electronic self-services)." Please share your recommendations as to the definition of substantial service.

The State will consider the input received during a 10-day comment period in finalizing the survey instruments. For your convenience, a comment form is attached to this information bulletin. A copy of the draft survey instruments is posted on our Web site at http://www.edd.ca.gov/emptran.htm. Comments must be submitted no later than November 13, 2000. Comments may be submitted by mail, fax, or electronic mail as follows:

Attention: Diane Bonar Employment Development Department Workforce Investment Division P. O. Box 826880, MIC 69 Sacramento, CA 94280-0001

E-mail: dbonar@edd.ca.gov
Fax Number: (916) 654-9586

Please share this information bulletin and the attached surveys with your local workforce investment partners and your local area staff, as appropriate. Any questions regarding this process should be addressed to Diane Bonar as noted above. All other questions should be directed to your assigned regional advisor, at (916) 654-7799.

/S/ BILL BURKE Chief

Attachments

CUSTOMER SATISFACTION SURVEY COMMENT FORM

RESPONSE DEADLINE: NOVEMBER 13, 2000

Attention: Diane Bonar Employment Development Department	Name:				
Workforce Investment Division PO Box 826880, MIC 69 Sacramento, CA 94280-0001	Telephone Number:				
E-mail: dbonar@edd.ca.gov Fax Number: (916) 654-9586	LWIA:				
Employer Survey:					
Participant Survey:					
Definition of Substantial Service:					

California Participant Customer Satisfaction 2000_v4.1

Hello, I'm [Name of Interviewer] from ???. Within the past few months you received services from [Name of One-Stop or EDD Office], which helps people find jobs or training. We would like to know how satisfied you are with the services you received from [Name of One-Stop or EDD Office] and welcome your suggestions for improving services. I am conducting this survey for the State of California and it should only take us about 10 to 15 minutes to complete. Your answers are confidential and not linked in any way to you. Your answers will be used only in combination with those of other people who used these services.

IF NECESSARY, READ: Your name was chosen in a scientifically selected random sample of employers who received services throughout California. Your response is vitally important to improving workforce development services to employers. Again, your participation is entirely voluntary, and we hope you will tell us about your experiences.

P1. I would like to ask you about the types services you received from either a One-Stop or EDD Office, which I will refer to as "the center" for the rest of my questions. Did you get any of the following help at the center:

INTERVIEWER NOTE: We will only ask about services that R is reported to have received as captured by and reported in administrative data.

a.	Help in learning about y <mark>o</mark> ur <mark>jo</mark> b skil	ls and job interests?
	Don't Know8	No
b.	Information about the types of ocyour area, such as trends in employ	•
	Don't Know 8	No
C.	Help in choosing the type of occupa	ati <mark>on that w</mark> as right for you?
	Don't Know 8	N <mark>o.</mark>
d.	Information about the skills needed right for you?	to work in an occupation that was
	Don't Know 8	No

e.	Help in planning the services or t was <mark>ri</mark> ght for you?	raining you needed to find a job that
	Don't Know 8	No
f.		for a job (for example, finding out a resume, or conducting a job
	Don't Kn <mark>ow</mark> 8	No
g.	Informat <mark>ion abo</mark> ut what emp (for exa <mark>mp</mark> le, wor <mark>kin</mark> g in teams, g	loyers expect of their workers etting along with supervisors)?
	Don't Know8	No
h.	Information about employers with employers?	n current job openings or referrals to
	Don't Know8	No 0 Yes 1
i.	Training to improve you <mark>r r</mark> eading.	math, or English language skills?
	Don't Know 8	No
j.	Classroom training in job skills? a One-Stop or other training center	This may have been through EDD, ers.
	Don't Know 8	No. <mark></mark>
k.	Training in job skills at a work s apprenticeship, or paid on-the-job	ite, in <mark>cl</mark> uding paid work experience, o training?
	Don't Know 8	No0 Yes1
I.	Support services, such as help expenses?	with transportation or child care
	Don't Know 8	No 0 Yes 1

	m.	Conta were c			er sta	iff duri	ing tr	aining	g or se	ervices	to see	how you
		Don't	Know			8	3					0 1
	n.	Are th (Pleas			er typ	es of	servio	es yo	ou rec	eived fr	om th	ne center?
P2.	mea		ry <mark>S</mark> at	isfied'	' what							' and "10" e services
	Ver <u>j</u> 1	y Dissat 2	isfied 3	4	5	6	7	8	Very S 9	atisfied 10	DK 11	Refused 12
P3.	to v "Fa	vhat ex	tent h	ave th	e serv	/ic <mark>es</mark> r	n <mark>et</mark> y	our e	xpecta	tions?	"1" no	e services, ow means eds Your
	Fall 1	s Short 2	of Exp 3	ectatio 4	ns 5	6	Ex 7	ceeds 8	Exped 9	ctations 10	DK 11	Refused 12
P4.	do serv	you thi	ink th "1" no	e serv ow me	ices ans "	you re	eceive	ed c <mark>o</mark>	mpare	with t	he id	. How well eal set of 0" means
	Not 1	Very Cl 2	ose to 3	ldeal 4	5	6	7	Very 8	Close 9	to Ideal 10	DK 11	Refused 12
	[NO	TE: In	terms	of com	pliance	e with (USDC)L, the	surve	y is com	plete a	after QP4.]
P5.	serv the		f the d	center	again	if you	u bec	ame	unemp	oloye <mark>d a</mark>	at <mark>so</mark> n	d use the ne time in ans "Very
	Not 1	Very Lii 2	kely 3	4	5	6	7	8	Ver 9	y Likely 10	D <mark>K</mark> 11	Refused 12

Again on a scale of 1 to 10, how likely is it that you would recommend to services of the center to a friend who needed to look for work?											
	t Very <mark>Li</mark> kely 2 3	4	5	6	7	8	Very 9	Likely 10	DK 11	Refus	
exp	noment ago I pectations. W nt to the cent	Vhat ty	_							_	
	-										
Ove	erall, how w <mark>ou</mark> l	d you r	rate yo	our exp	erienc	e with	the cen	ter? W	ould y	you say:	
Go Fai Po	cellent od r or Very Poor			4 3 2 <mark>/</mark>							
Wh	at did you lik	e best	abou	t your	expe	rience	with th	e cent	er?		
Но	w can the ser	vices a	at the	cente	r be in	nprove	ed?				
tre	the next fet ated by the c ng the scale:	enter.	To o	do this	s I wil	ll ask y	you to	rate s		•	
a.	First of all, person or o you say:	-		•				•		•	
	[Not applical [Don't Reme					Good			<mark></mark> .		

	b.	How would you rate the timeliness of the help that staff gave you? Would you say:								
		[Not applicable7] [Do <mark>n't</mark> Remember8]	Excellent							
	c.	the quality of the advice that sta	aff gave you?							
		[Not appl <mark>icable</mark> 7] [Don't Re <mark>m</mark> ember 8]	Excellent							
	d.	the variety of services you coul	d choose from?							
		[Not applicable	Excellent 5 Good 4 Fair 3 Poor 2 Or, Very Poor 1							
	e.	the extent that staff followed the needed?	rough in providing the services you							
		[Not applicable7] [Don't Remember8]	Excellent							
P12.		e next few questions consider ho n the center helped you. First of al	w mu <mark>ch the s</mark> ervices you received I, how <mark>m</mark> uch did the services:							
	a.	help you to search for a job? W	/ould <mark>yo</mark> u say:							
		Very Much								
	b.	teach you skills that you could	use on a job? Would y <mark>ou</mark> say:							
		Very Much 4 Somewhat 3 A little 2 Or, Not at all 2								

		Very Much
	d.	increase your confidence to look for a better job or career? Would you say:
		Very Much
	e.	Are there any other ways that the center's services helped you?
		Don't Know [GO to QP13] 0 No [GO to QP13] 0 Yes
		(1) What are they?
P13.	run	you currently work at a job for pay? (Probe: working for pay includes ning your own business, working in your family business, being on paid leave racation.)
		No [GO to QP17] 0 Yes 1
	a.	Did any of the services you received from the center help you to find this job?
		No 0 Yes 1
	b.	Do you currently work at more than one job for pay?
		No GO to c.]
		(1) Altogether, how many hours per week do you work for pay?

c.	Do <mark>yo</mark> u work at your <i>(main)</i> job 30 hours or more a week for pay?
	No . <mark></mark>
d.	Does your current <i>(main)</i> job relate to your overall career goals and training?
	No
e.	Is your (main) job long term? By this I mean is it likely that you will work at this job for more than a year?
	No, Not Long Term
	(1) Why do you think you might work at this job less than 1 year?
f.	When did you start working at your (main) job?
	Month/Year_
g.	What is your current job title for your (main) job?
h.	What type of industry is your <i>(main)</i> job in?
i.	Compared with the job you had just before receiving services from the center, would you say that you are currently:
	Not applicable

	j.	Compared with the job you he you say that, on average, you	nad just before receiving services, would are currently working:
		Less ho	ours per week than on your last job?1 urs per week than on your last job?1 you working about the same number of hours?2
	k.	Compared with the job you he you say that you are currently	nad just before receiving services, would y earning:
		Not applicable8	More money with your present job?
	l.	Compare <mark>d</mark> with the job you he you say that you are:	nad just before receiving services, would
		Not applicable8	Better off financially than before?
P14.	Doe	es your current employer off <mark>er</mark>	you a health plan or health insurance?
		Don't Know8	No [GO to b]
	a.	Do you participate in this hea	ılth pl <mark>an</mark> ?
		Don't Know8	No [GO to b]
	b.	[IF NO] Is your health care some other source?	covered through MediCal, Medicare or
		Don't Know8	No
	C.		urself, pay for your health plan or health at is, tell me about any amount you pay ays?
			CLARIFY]
		Don't Know7 Refused8	

	d.	Do you get any other benefits through this job besides health insurance or a health plan?
		Don <mark>'t Know</mark> 8 No
	e.	Please tell me about any other benefits you receive through your job.
P15.	you	eve just two more questions to ask you. First of all, what is the date of ar birth?
P16.		ally, I would like you to think about how well you were able to
	rem	nember the staff and the services you received the last time you used center. Would you say you remembered:
	A Ic Sor	ost everything
		Thank you for answering these questions. We greatly appreciate your assistance in improving services.
P17.	[IF	UNEMPLOYED]
	a.	How many months have you currently been unemployed?
		<u>Months</u>
	b.	What type of work did you do at your last job? [For example, construction, agriculture, service, etc.]
	c.	What was your job title then? [IF NECESSARY ASK: What did you do on the job?]

	d.	Are you currently looking for work?
		No <mark> </mark> [GO to QP18.] 0 Yes1
	e.	What type of work are you looking for? [For example, construction, agriculture, service, etc.]
P18.	you	ve just two more questions to ask you. First of all, what is the date of ath/Day/Year
P19.	rem	ally, I would like you to think about how well you were able to ember the staff and the services you received the last time you used center. Would you say you remembered:
	A lo Son	ost everything

Thank you for a<mark>ns</mark>wering these questions.
We greatly appreciate your assistance in improving services.



California Employer Satisfaction 2000 _v4.1

Hello, I'm [Name of Interviewer] from ???. Within the past 90 days you received services from [Name of One-Stop or EDD Office], which helps employers find new staff or handle large layoffs. Are you the person from your firm to talk with about your experiences with [Name of One-Stop or EDD Office]? If not, whom should I contact (Record on call list)?

We would like to know how satisfied you are with the services you received from [Name of One-Stop or EDD Office] and welcome your suggestions for improving services. I am conducting this survey for the State of California and it should only take us about 10 to 15 minutes to complete. Your answers are confidential and not linked in any way to you. Your answers will be used only in combination with those of other employers who used these services.

IF NECESSARY, READ: Your name was chosen in a scientifically selected random sample of employers who received services throughout California. Your response is vitally important to improving workforce development services to employers. Again, your participation is entirely voluntary, and we hope you will tell us about your experiences.

IF EMPLOYER REPORTS THAT THEY DID NOT RECEIVE SERVICES, READ:

I would like to read you a list of the types of services that you might have received. Did you receive any of the following services in the past few months. PROCEED WITH ITEMS IN QUESTION 1

E1. I would like to ask you about the types services you received from [Name of One-Stop or EDD Office], which I will refer to as "the center" for the rest of my questions. During the past 90 days, did the center provide you with any of the following services:

INTERVIEWER NOTE: We will only ask about services that R is reported to have received as captured by and reported in administrative data.

a .	Post your job opening(s)?			
	Don't Know 8	No		0
		Yes		1
b.	Screen applications for your job ope	ning(s)?	? [Be sure <mark>to ask</mark>	QE6]
	Don't Know 8	No		0

C.	Refer job applicants to your business	s? [Be sure to ask QE6]
	Don't Know 8	No
d.	Help pay for part of a new employee training program?	s wages through an on-the-job
	Don't Know 8	No
e.	Design a customized training progra of your business?	m to train potential new employees
	Don't Know 8	No
f.	Conduct job <mark>fa</mark> irs where you met pot	ential workers?
	Don't Know 8	No
g.	Provide information about Unemploy	ment Insurance taxes?
	Don't Know8	No
h.	Provide information about tax credit	s for hiring low-income workers?
	Don't Know 8	
i.	Provide information about the labor trends or prevailing wages?	market <mark>, such as</mark> employment
	Don't Know 8	No
j.	Help you plan for a layoff?	
	Don't Know 8	No
k.	Make presentations to employees th	at you were laying off?
	Don't Know 8	No

	1.	Conduc	st Semi	illais v	wiiere	you le	ameu	abot	il iabi	Ji laws:		
		Don't K	now									0
								Yes				1
	m.	Are the			types	s of sei	rvices	you r	eceiv	ed from	the ce	enter?
		YER RE							•	, "NO" (ON AL	L ITEMS
E2.	mea		y Sa <mark>ti</mark>	<mark>s</mark> fied"	<mark>wh</mark> at							and "10" services
	Very 1	/ Dissati: 2	sfied 3	4	5	6	7	8	/ery S 9	atisfied 10	DK 11	Refused 12
E3.	to w	hat ext	ent ha	eve the	serv	ices <mark>m</mark>	n <mark>et</mark> you	ır ex	pecta	tions? "	'1" nov	services, w means ds Your
	Falls 1	s Short c	of Expe	ectation 4	s 5	6	Exc 7	eeds 8	Exped 9	ctations 10	DK 11	Refused 12
E4.	do serv	you thii	nk the 1" no	e servi w mea	ces y ins "N	ou re	ceived	con	n <mark>pare</mark>	with th	ne idea	How well al set of " means
	Not 1	Very Clo 2	ose to l	ldeal 4	5	6	7	/ery (8	<mark>Clo</mark> se 9	to Ideal 10	DK 11	Refused 12
[NOTE	E: In	terms o	of com	plianc	e with	USDC	DL, the	surv	ey is	complet	e after	^r QE4 .]
E5.	agai	-	tain er	nployn	nent s	service	s for a	bus	_			ne center ans "Not
	Not 1	Very Lik 2	ely 3	4	5	6	7	8	Ver 9	y Likely 10	DK 11	Refused 12

E6.	cen	iin on a sca ter to a p <mark>'his bu</mark> sines	rofessio			-		-			
	N <mark>ot</mark>	Very Likely	4	5	6	7	8	Very 9	Likely 10	DK 11	Refused 12
E7.	ехр	noment ago ectations.		•							•
			-								
		YER RECEI			RALS	OF JO	OB APP	PLICAN	ITS, P	ROCE	ED WITH
5 0			DEOE	(ED. 5						•	
E8.	refe	EMPLOYER rred to you uld you say	by the	cente	r meet	the r	equirer	nents	of you	•	
	Mos Son	npletely met stly met your newhat met y didn't meet y	requiren our requ	nents . iireme	ents	2					
	a.	[IF EMPLO									
		Don't Know	·			8	No Yes	•-			0 1
	b.	[IF EMPLO performan the center	ce of the	е арр	licants		-		_		-
		Don't Know	,			8	Good Fair Poor				5 3 2 1

E9.	tr <mark>ea</mark>	the next few questions I want to knated by the center. To do this, I wing the scale: excellent, good, fair, po	Il ask you to rate some categories						
	a.	First of all, how would you rate the availability of staff (either in person or over the phone) to help you when you needed it? Would you say:							
		Not Applicable8	Excellent 5 Good 4 Fair 3 Poor 2 Or, Very Poor 1						
	b.	How would you rate the timeliness of the help that staff gave you? Would you say:							
		Not Applicab <mark>le</mark>	Excellent						
	c.	the quality of the informati <mark>on an</mark> d advice that staff gave you?							
		Not Applicable8 Don't Know8	Excellent 5 Good 4 Fair 3 Poor 2 Or, Very Poor 1						
	d.	the variety of services you could choose from?							
		Not Applicable8	Excellent						
	e.	the extent that staff followed through in providing the services you needed?							
			Excellent 5 Good 4 Fair 3 Poor 2 Or, Very Poor 1						

	f.	the ease of doing business with	the center?						
		Not Applicable8 Don't Know8	Excellent 5 Good 4 Fair 3 Poor 2 Or, Very Poor 1						
E10.		erall, how many times would you vice from the center over the past 1	estimate that you have used any 2 months?						
		Don't Know [GO to QE11] 8	First time [GO to QE11]1 Record estimated number of times ————						
	a.		recently received from the center ce from the center? Would you say						
		Don't Know [GO to QE11]	Better than previous service						
	b.	[IF BETTER] In what ways is it better?							
		ШШШШ	GO TO QE11]						
	c.	[IF WORSE] In what ways is it wor	se?						
E11.	wit		ly received from the center compare her government related offices and						
	Don		Better than other government related offices3 Worse than other government related offices [GO to c.]1 Or, About the same [GO to QE12]2						

	b.	[IF WORSE] In what ways is it worse?
E12.		hin the last 12 months did you use any private sector employment or ning services?
		Don't Know GO to c.] 8 No [GO to QE13]
	a.	How would you compare the quality of the services you received from these private sector agencies with those you received at the center? Would you say that it is:
		Don't Know [GO to c.] 8 Better than private sector agencies 3 Worse than private sector agencies [GO to c.] 1 Or, About the same [GO to QE13] 2
	b.	[IF BETTER] In what ways is it better?
	c	
	C.	[IF WORSE] III What ways is it worse!
E13.	12	erall, thinking back over your experience with the center over the past months, how would you rate the staff and services from the center? uld you say:
	God Fail Pod	cellent

E14.	What have you liked best about your experience with the center?								
E15.	How can the services at the center be improved?								
E16.	Does your firm currently offer its employees a health plan or health insurance?								
	Don't Know 8 No [GO to QE17]								
	a. [IF YES] Do you offer health insurance to:								
	All of your employees3 Most of your employees2 Or only some of your employees1								
	b. For your employees that you offer health insurance, do you pay:								
	All of the costs for your employees3 Most of costs2 Or only part of the cost1								
E17.	Finally, I would like you to think about how well you were able to remember the staff and the services you received from the center. Would you say you remembered:								
	Almost everything								

Thank you for answering these questions.

We greatly appreciate your assistance in improving services.